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RAUSCHENBACH PATENT ATTORNEYS AT LAW

TO: Examiner Karla A. Moore
AT: United States Patent and Trademark Office
Art Unit: 1763

TEL: 571.272.1440
FAX: 703.872.9306

FROM: Kurt Rauschenbach, Ph.D.
DATE: February 17, 2005
RE: Response to Office Action Mailed on November 17, 2004
CLIENT: USSN: 10/604,502 (FLU-001)
PAGES: 16 (Including this Cover Sheet)

COMMENTS.

Dear Examiner Moore:

Following this cover sheet, please find an Amendment and Response, and related documents to the Office Action mailed on November 17, 2005 for the above-referenced case.

Please send confirmation of receipt of this facsimile transmission by return facsimile. My fax number is 781.271.1527.

Thank you,
Kurt Rauschenbach

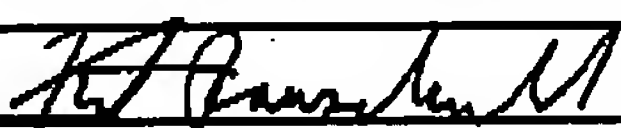
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PTO/S2100-04)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/604,502
	Filing Date	7/25/2003
	First Named Inventor	Sferlazzo
	Art Unit	1763
	Examiner Name	Karla A. Moore
Total Number of Pages In This Submission	16	Attorney Docket Number FLU-001

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="text-align: center;">Facsimile Cover Sheet (1 pg.)</div>
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Rauschenbach Patent Law Group, LLC	
Signature		
Printed name	Kurt Rauschenbach	
Date	February 17, 2005	Reg. No. 40,137

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Kurt Rauschenbach	Date	February 17, 2005

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/604,502
		Filing Date	7/25/2003
		First Named Inventor	Sferlazzo
		Examiner Name	Karla A. Moore
		Art Unit	1763
TOTAL AMOUNT OF PAYMENT (\$) 50.00		Attorney Docket No.	FLU-001

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims: 46 - 20 or HP = 2 Extra Claims: 2 Fee (\$): 25 Fee Paid (\$): 50.00
 HP = highest number of total claims paid for, if greater than 20

Indep. Claims: - 3 or HP = 3 Extra Claims: 3 Fee (\$): 600 Fee Paid (\$): 600
 HP = highest number of independent claims paid for, if greater than 3

Multiple Dependent Claims: Fee (\$): 360 Fee Paid (\$): 360

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

SUBMITTED BY		Registration No.	Telephone
Signature	<i>Kurt Rauschenbach</i>	(Attorney/Agent) 40.137	781.271.1503
Name (Print/Type)	Kurt Rauschenbach	Date	February 17, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT
Attorney Docket No.: FLU-001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Piero Sferlazzo

SERIAL NO.: 10/604,502

GROUP NO.: 1763

FILING DATE: July 25, 2003

EXAMINER: Karla A. Moore

TITLE: CONTINUOUS FLOW DEPOSITION SYSTEM

Commissioner for Patents
Alexandria, Virginia 22313-1450

AMENDMENT AND RESPONSE

Sir:

The following amendments and remarks are responsive to the Office Action mailed on November 17, 2004 in the above-identified patent application. Entry and consideration of the following amendments and remarks, and allowance of the claims, as presented, are respectfully requested.

Please enter the following amendments and consider the remarks that follow.

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